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GAV 1648

Patent
252/029US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Anna Catania et al.

Serial No.: 09/533,341

Filed: March 23, 2000

For: ANTIMICROBIAL AND ANTI-
INFLAMMATORY PEPTIDES FOR USE IN
HUMAN IMMUNODEFICIENCY VIRUS

Group Art Unit: 1648

Examiner: Jeffrey S. Parkin, Ph.D.

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TECH CENTER 1600/2900

AMENDMENT TRANSMITTAL

Box Responses Fee

Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment for the above-identified application.

05/01/2002 SSITHIB1 00000090 122475 09533341

01 FC:216 200.00 CH

LA-231710.1

CERTIFICATE OF MAILING
(37 C.F.R. § 1.8)

I hereby certify that the paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

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- ☒ Applicant(s) petitions for extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION (months)		FEE FOR SMALL ENTITY		FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/>	\$55.00	<input type="checkbox"/>	\$110.00
2 months	<input checked="" type="checkbox"/>	\$200.00	<input type="checkbox"/>	\$400.00
3 months	<input type="checkbox"/>	\$460.00	<input type="checkbox"/>	\$920.00
4 months	<input type="checkbox"/>	\$720.00	<input type="checkbox"/>	\$1,440.00
5 months	<input type="checkbox"/>	\$980.00	<input type="checkbox"/>	\$1,960.00

- ☐ An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.

- ☒ Extension fee due with this Request \$200.00.

- ☒ If an additional extension of time is required, please consider this a petition therefor.

FEES FOR CLAIMS:

- ☒ Applicant claims small entity status pursuant to 37 CFR 1.27.

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	-	20	=	0	x	\$18.00	\$0.00
Independent Claims	-	3	=	0	x	\$84.00	\$0.00
Multiple Dependent Claims	\$280	(if applicable)			<input type="checkbox"/>		\$0.00
TOTAL OF ABOVE CALCULATIONS							\$0.00
Reduction by 1/2 for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.					<input type="checkbox"/>		\$0.00
TOTAL FEES FOR CLAIMS SUBMITTED HEREWITH							\$0.00

- ☐ A check in the amount of _____ is enclosed to cover the above fee(s).

- ☒ Charge Lyon & Lyon's Deposit Account No. 12-2475 in the amount of \$200.00.

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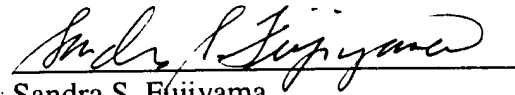
The Commissioner is authorized to charge Lyon & Lyon's Deposit Account No. **12-2475** for any fees required under 37 CFR §§ 1.16 and 1.17 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **12-2475**.

Respectfully submitted,

LYON & LYON LLP

Dated: April 18, 2002

By:



Sandra S. Fujiyama
Reg. No. 46,713

633 West Fifth Street, Suite 4700
Los Angeles, California 90071-2066
(213) 489-1600